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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/516,781	
	Filing Date	12/03/2004	
	First Named Inventor	Silvio AIME	
	Art Unit	1618	
	Examiner Name	Dameron Levest JONES	
Total Number of Pages in This Submission	10	Attorney Docket Number	B0459 US

<b>ENCLOSURES (Check all that apply)</b>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD  <div style="border: 1px solid black; padding: 2px;">Remarks</div> <p>No fee is believed to be due with the filing of this Amendment After Allowance and Response to Notice of Allowance And Fee(s) Due. However, if any fees are deemed necessary, the Director is hereby authorized to charge any required fees and credit any overpayments to Deposit Account No. 50-2168.</p>	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Reply to 5/26/10 Notice of Allowance And Fee(s) Due: Transmittal; Part B Fee Transmittal; and Amendment After Allowance.
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm Name		
Signature	/M. Caragh Noone/	
Printed name	M. Caragh Noone	
Date	June 8, 2010	Reg. No. 37,197

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